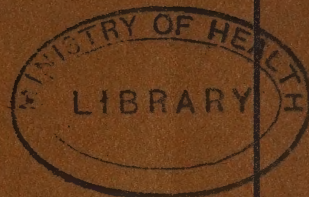


Health Org. S
C. H. 209. III

LEAGUE OF NATIONS

HEALTH ORGANISATION



Organisation of the Public Health Services

IN THE

KINGDOM OF THE NETHERLANDS

BY

DR N. M. JOSEPHUS JITTA

President of the Health Council.

HEALTH DOCUMENTS

ISSUED BY THE

LEAGUE OF NATIONS

HEALTH ORGANISATION

MINUTES of the FIRST SESSION of the Provisional Health Committee, held at Geneva, August 25th-29th, 1921. (English and French texts.) (C. 400. M. 280 1921. III.).	3/6	\$ 0.70
MINUTES of the SECOND SESSION of the Provisional Health Committee, held at Paris, October 20th-22nd, 1921. (English and French texts.) (C. 471. M. 346. 1921. III.).	7/6	\$ 1.50
MINUTES of the THIRD SESSION of the Provisional Health Committee, held at Paris, May 11th-16th, 1922. (C. 366. M. 217. 1922. III.).	2/-	\$ 0.40
MINUTES of the FOURTH SESSION of the Provisional Health Committee, held at Geneva, August 14th-20th, 1922. (English and French texts.) (C. 555. M. 337. 1922. III.).	7/6	\$ 1.50
MINUTES of the FIFTH SESSION of the Provisional Health Committee, held at Geneva, January 8th-13th, 1923. (C. 27. M. 13. 1923. III.).	4/-	\$ 1.—
MINUTES of the SIXTH SESSION of the Provisional Health Committee, held at Paris, May 26th-June 6th, 1923. (C. 424. M. 187. 1923. III.).	5/-	\$ 1.20
REPORT on the Work of the SIXTH SESSION of the Provisional Health Committee (A. 28. 1923. III.).	2d.	\$ 0.05
MINUTES of the FIRST SESSION of the Health Committee, held at Geneva, February 11th-21st, 1924. (C. 10. M. 7. 1924. III.).	4/6	\$ 1.10
MINUTES of the SECOND SESSION of the Health Committee, held at Paris, May 7th-May 16th, 1924. (C. 213. M. 69. 1924. III.).	1/-	\$ 0.25
WORK of the HEALTH ORGANISATION of the League, including the Work of the Epidemic Commission : Report of the Second Committee to the Assembly. (A. 74. 1923. III.).	3d.	\$ 0.10
REPORTS on SEROLOGICAL INVESTIGATIONS presented to the Second International Conference on the Standardisation of Sera and Serological Tests, held at the Pasteur Institute in Paris in November 1922.	8/-	\$ 2.—
EPIDEMIC COMMISSION of the League of Nations : FIRST ANNUAL REPORT, 1921	4/-	\$ 0.80
SECOND ANNUAL REPORT, 1922. (English and French texts.) (C. 563. M. 421. 1922. III.).	3/-	\$ 0.60
REPORT on the INTERNATIONAL CONFERENCE ON THE STANDARDISATION OF SERA AND SEROLOGICAL TESTS, convened by the Health Committee of the League of Nations and held from December 12th-14th, 1921, at the British Ministry of Health, London. (English and French texts.) (C. 533. M. 378. 1921. III.).	1/6	\$ 0.30
REPORT on the SECOND INTERNATIONAL CONFERENCE ON SERA AND SEROLOGICAL TESTS, convened by the Health Committee of the League of Nations and held from November 20th-26th, 1922, at the Pasteur Institute, Paris.	1/-	\$ 0.25
REPORT on the EUROPEAN HEALTH CONFERENCE, held at Warsaw from March 20th-28th, 1922.	2/6	\$ 0.50
REPORT of the TECHNICAL CONFERENCE FOR CONSIDERATION OF CERTAIN METHODS of BIOLOGICAL STANDARDISATION. Edinburgh, July 19th-21st, 1923.	2d.	\$ 0.05



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LEAGUE OF NATIONS.

HEALTH ORGANISATION.

Organisation

OF THE

Public Health Services

IN THE

Kingdom of the Netherlands

By Dr. N. M. JOSEPHUS JITTA,

Président of the Health Council.

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PREFACE

Health legislation and administration constitute one of many factors which go to form the public life of a nation. Unlike political institutions, health institutions do not arise out of an organic unity and cannot develop on a definite plan. The changes and innovations introduced in the course of years have, for the most part, been made haphazard. The problems have arisen from the vicissitudes of life itself. In short, the needs of the moment have determined the intervention of the legislator and of the administration. The health problem assumes very different aspects at different times and in different places.

The technical resources at the disposal of the various countries and the psychological factors involved have varied in every way and this has given a distinct character to every health organisation. Consequently, it is a matter of great difficulty, even for health specialists, to form an accurate opinion on foreign health organisations ; and yet the great complexity and ever-increasing number of international problems with which we have to deal makes it essential to gain at once some knowledge of these different institutions. Failing this knowledge, not only does co-operation become difficult but the opinion that may be formed regarding the condition of public health in a given country is extremely liable to error.

Furthermore, information on disease obtainable from several different countries is very difficult to compare, as it comes from such different sources.

An indispensable preliminary to any useful study of the problem is a process of standardisation requiring the most thorough knowledge of the international health administrations.

As the work of the Health Organisation of the League of Nations is strictly international, the primary aim of this body should be to remedy as far as possible the difficulties arising from the diversity of the sources of information. The Health Organisation has accordingly decided to publish a series of monographs describing the organisation and working of the health administrations of the different countries. For the writing of these reports it has enlisted the services of experts occupying important positions in the various health administrations.

The original proposal was to make all these monographs conform to a fixed pattern. The Health Section of the Secretariat of the League of Nations accordingly

sent a note to the authors of these monographs framed with a view to obtaining reports which could be directly compared ; but the majority of the authors preferred to present their work in a less stereotyped form.

The series of enquiries which we have undertaken to publish deals with health administration from the general standpoint only. We propose subsequently to publish investigations on certain special points in the field of public health, which will give additional and more detailed information on these points.

In publishing these general enquiries we have been greatly helped by the generous financial grants provided by the International Health Board of the Rockefeller Foundation.

Geneva, July 1st, 1924.

HEALTH SECTION OF THE SECRETARIAT
OF THE LEAGUE OF NATIONS.

Organisation of the Public Health Services in the Kingdom of the Netherlands.

By Dr. N. M. JOSEPHUS JITTA,
President of the Health Council.

NOTIFICATION OF DISEASES.

The notification of diseases is provided for in Article 6 of the Law of June 1st, 1865, which lays down rules concerning the exercise of the medical profession.

Article 6 provides : "On discovering the existence of a disease dangerous to public health they ¹ shall immediately, and at latest within three days, inform the inspector of their district responsible for supervising the application of the present law, together with the burgomasters and aldermen of their commune".

(The information in question must be forwarded to the Inspector of Infectious Diseases in whose district the commune is situated.)

On being asked to name the diseases which constituted a menace to public health, and in respect of which, therefore, notification was obligatory, the Minister of the Interior in his Circular dated September 6th, 1866, replied in a more or less general way as follows : "In my opinion, Article 6 of the Law of June 1st, 1865 (*Legal Gazette*, No. 60), makes it obligatory for doctors to notify *all cases of disease constituting a menace to public health*. This definition only includes, therefore, epidemic diseases. I express this view without prejudice to the opinion of the judge in the event of proceedings being taken in respect of an infringement of the said Article".

In practice, a relation has been established between this law and Article 1 of the Law of December 4th, 1872 (*Legal Gazette*, p. 134), which lays down various measures for the prevention of infectious diseases — a law which has subsequently been modified on several occasions.

Under the terms of Article 1, the law is applicable to the following diseases :

Asiatic cholera ;
Typhus and typhoid fever ;
Smallpox (*variolaë*, *varioloïds*) ;
Scarlet fever ;
Diphtheria ;
Dysentery ;
Plague.

(For details see below, under the heading "Legislation against Infectious Diseases".)

¹ *I.e.*, the doctors.

Article 16 of the Law of December 4th, 1872, reads as follows :

“Without prejudice to the notification to be made to the inspector in accordance with Article 6 of the Law of June 1st, 1865 (*Legal Gazette*, No. 60), any doctor who discovers a case of Asiatic cholera, smallpox or plague shall communicate the fact within 24 hours to the burgomaster of the commune in which he has discovered the patient.

“The burgomaster shall immediately forward a copy of such notification to the inspector.”

It is further provided in Article 19 of this law :

“All heads of households, lessees (male or female) of night-shelters or lodging-houses and masters of vessels calling at ports situated within any commune, and the directors of such charitable institutions as are referred to in Articles 1 and 2 of the law concerning public assistance, and of prisons, reformatories, public penitentiaries, workhouses and lunatic asylums, shall inform the burgomaster, within 24 hours after discovery, of any case of infectious disease which has occurred on the premises in question.

“The same regulation shall apply to the commanding officers of army corps or warships stationed in any port, in respect of all barracks, vessels, etc., placed under their control.”

NOTIFICATION OF OCCUPATIONAL DISEASES.

The notification of occupational diseases is regulated by Article 82 of the *Law of 1919 concerning Labour*. This article reads as follows :

“1. All doctors are required to notify, in writing, the Minister, or one of the officials designated by him, of any cases which he may be treating of certain diseases enumerated in a general administrative regulation. The general regulation may, in respect of all or some of these diseases, restrict obligatory notification to cases in which the patient is or was employed during a certain period previous to the beginning of medical treatment in certain enterprises specified in the general regulation.

“2. The general administrative regulation shall determine in detail the manner in which the obligation imposed in the preceding paragraph is to be carried out and may provide for the payment of a fixed sum in respect of each notification”.

The general administrative regulation referred to above was issued in 1920 : viz., the Order of October 4th, 1920 (*Legal Gazette*, No 773), which constitutes a general administrative measure as provided for in Article 82 of the Law of 1919 concerning labour.

Objects which it is desired to have examined free of charge may be forwarded to the *Central Laboratory* established at *Utrecht* for the requirements of official public health supervision (opened on May 2nd, 1910).

Any practitioner may make application, free of postal charges, to the director of the laboratory for the wrappings which he requires for the consignments. The laboratory possesses different kinds of wrappings : for sputum and urine, particularly with a view to discovering tuberculosis bacilli ; for matter obtained by scraping the nose, the throat or other organs, with a view to discovering diphtheria bacilli ; for (excrements) urine and blood, with a view to discovering the presence of typhus and similar diseases ; for blood and spinal fluids, with a view to testing the Wassermann reaction, or to carrying out any other examination of the cerebral spinal fluids ; and for blood preparations, with a view to discovering the presence of malaria.

As soon as the result of the examination is known, the doctor is informed by letter or telegraph. If the examination relates to an acute infectious disease and gives a positive result, the result is communicated to the Inspector of Public Health concerned.

A “Table of Notified Cases of Infectious Diseases” (as provided for in the Law of December 4th, 1872 (*Legal Gazette*, No. 134), as finally amended by the Law of November 27th, 1919 (*Legal Gazette*, No. 784), will be published *weekly*, in the form of an Annex to the Dutch *Legal Gazette*.

This table is drawn up at the offices of the Health Council, with the help of data supplied by the Inspectors of the Public Health Supervision Department.

The number of cases which have occurred of the diseases mentioned in Article 1 of the Law of December 4th, 1872, and of the diseases to which this law has been declared to apply for a period of one year, will be stated every month in the “*Verslagen en Mededeelingen betreffende de Volksgezondheid*” (Reports and Communications concerning Public Health).

NOTIFICATION OF BIRTHS AND DEATHS.

Under the terms of Article 29 of the Civil Code, notifications of births must be made to the registrar of the commune in the presence of two witnesses within three days of delivery. The registrar must immediately record the notification. He is entitled to demand that the child be shown to him.

Article 30. “The notification of the birth of a child must be made by the father, or failing him by the doctors, surgeons, midwives or other persons who have been present at the delivery ; if the mother gave birth to the child at a place other than her ordinary place of residence, the notification must be made by the person in whose house the birth took place.”

Article 31. "The birth certificate must mention :

- (1) The year, date, hour and place of birth ;
- (2) The sex of the child and the names which are to be given to him ;
- (3) The names, surnames, profession and domicile of the parents ;
- (4) The names, surnames, age, profession and domicile of the persons making the notification and of the witnesses."

The case of children who die within three days of birth gives rise to difficulties.

If the birth has been notified immediately, and if the child dies, for example, after the second day, it is inscribed both in the register of births and in the register of deaths.

If it dies before notification is made, it is only inscribed in the register of deaths. Children declared to be "*not living*" are not necessarily stillborn children, as that heading is sometimes made to cover children who have died *very young*.

Since January 1st, 1917, the certificates of children declared to be "*not living*" are completed by a mention of the supposed age of the child and by a statement as to whether the child declared to be "*not living*" was born dead or alive ; in the latter case, the length of time that it lived must be mentionned.

In the case of a child declared to be "*not living*", the "*certificate of death*" provided for by Article 5 of the Law of June 1st, 1865 (*Legal Gazette*, No. 60), must be given.

This article reads as follows :

"Doctors shall sign, upon the death of any of their patients, a certificate of death for the use of the registrar and shall at the same time indicate with the greatest precision possible, but without breaking their oath or promise of professional secrecy, what they believe to be the cause of death.

"They shall only issue the certificate mentioned in the preceding paragraph after assuring themselves of the fact that death has actually occurred by personally examining the corpse."

In ordinary circumstances the doctor who certifies death is the doctor who has attended the patient ; in certain cases the cause of death is notified by the doctor whom the communal administration has entrusted with the duty of certifying deaths (Circular of the Ministry of the Interior dated May 27th, 1902, No. 3225, Department B.B., concerning the issue of certificates of death).

The forms employed for this purpose in the communes are *not standardised* by law.

Under Article 6 of the Law of April 10th, 1869 (*Legal Gazette*, No. 65) (as modified in various details), relating to the measures to be taken regarding the burial of bodies, cemeteries and inhumation fees, no interment may take place earlier than 36 hours or later than the fifth day after death (subject to the exceptions mentioned in detail in Article 6).

Article 6 reads :

“No interment may take place earlier than 36 hours or later than the fifth day after death.

“The burgomaster may grant a dispensation in writing in respect of this regulation after taking medical opinion.

“If a doctor declares that it is necessary to hasten or delay the interment, the burgomaster may give written orders to the effect that the interment shall take place before or after the date fixed in the first paragraph of the present article.

“The burgomasters and aldermen may give orders, in the interests of public health, that persons who have died of a specified disease shall, within a period of less than 36 hours after death, be transported to the mortuary, if there is one in the district.”

While it is prescribed that *every person who has died, and every stillborn child, shall be interred*¹ (in a closed coffin and in a cemetery fulfilling the conditions laid down in the law in question, etc.) — Article 1 of the law — Article 4 stipulates as follows :

“No interment may take place without the written permission of the registrar, etc...

“...In asking for permission, the applicant must produce the written certificate referred to in Article 5 of the Law of June 1st, 1865 (*Legal Gazette*, No. 60). In the absence of such certificate, steps shall be taken to ascertain that death has actually taken place and the certificate will be issued by a doctor appointed annually by the burgomaster and aldermen and required to take an oath or make a promise in the presence of the burgomaster, the formula of which shall be determined by ourselves.”

There is *no* law regarding the burial of a child prematurely born.

The registrar is, however, required to grant to a person who notifies the premature birth of a stillborn child the inhumation permission mentioned in this article (Instruction of the Minister of the Interior, dated January 11th, 1873, G. 1113).

The data inscribed on birth and death certificates are collected in the Central Statistical Bureau at The Hague.

Every *month* this Bureau publishes a “Table of marriages, births and deaths, catalogued according to age and causes of death.”

Every *year* the Bureau publishes “Statistics of deaths, catalogued according to age and causes of death”.

The last statistics which have been published relate to the year 1921.

In 1917 a publication was issued entitled “Statistics of deaths which have occurred among men of 18 to 65, classified according to professions and causes of death, 1908-1911”.

¹ The authorities tacitly tolerate *cremation*. (The first cremation took place about 10 years ago and the high court declared the persons responsible therefor to be “not guilty”.)

Data regarding diseases which have occurred among the military, naval and colonial forces are also collected by the Central Bureau.

These data will not, however, be printed in future as has been the case until now.

Every month there will be published in the “Verslagen en Mededeelingen betreffende de Volksgezondheid” (Reports and Communications concerning Public Health) a return of persons who have died in the different communes of the diseases mentioned in Article 1 of the Law of December 4th, 1872 (*Legal Gazette*, No. 134).

The data on the basis of which this return is drawn up are supplied by the Central Statistical Bureau.

CENSUS.

The last census was taken in the Netherlands on December 31st, 1920.

STATISTICS.

In addition to an advisory body — the “Central statistical Commission” established by a Royal Decree dated October 6th, 1892, No. 233, — a Central Statistical Bureau was instituted by a Royal Decree dated January 9th, 1899, (*Legal Gazette*), No 43. The Commission remains the advisory body and keeps in touch with the Bureau and the latter can neither institute nor suspend statistical researches or publications without being authorised to do so in advance by the Central Commission.

The Commission may also give orders to the Bureau on its own authority and the Bureau must obey such orders, subject to an appeal to the Minister of the Interior. The Government cannot give direct orders to the Central Bureau; the orders are given by the Commission; in this way, the independence of the Central Bureau in its relations with the Government is safeguarded. The funds necessary for statistical work are provided for in the Budget of the Ministry of the Interior. The organisation of statistical work in the Netherlands is *not regulated by law*.

Centralisation has been effected in statistical matters by the establishment of a Central Bureau, as the statistics heretofore collected in the different departments are all transmitted to this Bureau.

COMMUNAL STATISTICAL BUREAUX.

By a decision of the Communal Council of July 4th, 1894, a Communal Statistical Bureau was established at Amsterdam.

In addition to the Bureau at Amsterdam, communal bureaux have been established at The Hague, Rotterdam and Utrecht.

A Statistical Commission is attached to the Health Council and this Commission has already issued several publications.

A Medical Statistical Bureau is attached to the medical and sanitary service of the Commune of Amsterdam and this Bureau has, since 1920, drawn up the statistics with regard to the patients of the communal medical service.

HEALTH LEGISLATION.

INTERNATIONAL REGULATIONS.

1. — *Opium Convention.*

The Law of June 20th, 1914 (*Legal Gazette*, No 257), containing the ratification of the Opium Convention concluded on January 23rd, 1912, at The Hague between the Netherlands and certain other States.

The Royal Decree of June 10th, 1920 (*Legal Gazette*, No 290), ordering the publication of the International Opium Convention in the *Legal Gazette* of January 23rd, 1912.

1. — *Measures taken in the Netherlands to prevent the Use of Opium and other similar Substances.*

In order to be in a position to carry out the International Opium Convention, the Netherlands Government promulgated a law containing measures on opium and similar substances mentioned in that Convention ; this law came into force in October 1920.

There already existed a series of rules in the law on the exercise of the pharmaceutical profession designed to restrict the retail sale, viz. : in the case of opium, the sale of quantities below 50 grammes and in the case of chloro-hydrate morphine and cocaine, the sale of quantities below 10 grammes, to chemists and doctors who keep pharmacies. The latter are required to enter in a register any quantity which they have supplied, unless it has been supplied upon a doctor's order. Veterinary surgeons are subjected to similar regulations.

The new opium law makes it unlawful to prepare, transport, sell, supply, import or export opium and its derivatives (raw, prepared or medicinal opium, morphine and heroin) or cocaine ; it also prohibits the stocking of these substances.

This prohibition does not apply :

(1) To chemists and doctors keeping pharmacies or to veterinary surgeons, subject to the stipulations already mentioned. The exercise of their profession is subjected to State supervision ;

(2) To persons who are authorised to engage in scientific study or research, to trade in narcotics or to prepare these drugs or the medicaments which contain them. The second of the authorisations referred to is only granted to persons who can prove that they are engaged in the wholesale drug trade, that they do not sell the drugs over the counter and do not keep a shop ; the third authorisation referred to is only granted to persons who can prove that they are engaged in the wholesale manufacture of pharmaceutical products.

Further, certain conditions must be fulfilled :

(a) The preparation of the narcotics and of the medicaments containing these substances must take place exclusively in buildings or premises suitable for the purpose ;

(b) The person concerned must keep a register in which he enters each amount purchased, sold, supplied, exported, imported or prepared, together with the date ;

(c) Narcotics may only be supplied to persons authorised to obtain them ;

(d) Raw or imported opium and prepared opium intended for exportation must pass exclusively through the offices at Oldenzaal or Rosendaal or through the Ports of Amsterdam or Rotterdam ;

(e) The exportation of raw or prepared opium to countries which do not allow it to be imported is prohibited ;

(f) In order to export narcotics to countries where import restrictions exist, the nature of the products despatched must be described in the documents accompanying the consignments, and the number and date of the export licence must be given.

(g) In order to export raw opium, each consignment containing more than five kilogrammes must be marked "raw opium", and in order to export prepared opium, each consignment must be marked "prepared opium". The marks on the wrappings must be placed on the same side as the address and must be written in letters three centimetres high and in such a manner that they cannot be effaced by water.

* * *

The public health inspectors, and in particular those who are responsible for supervising chemists, etc., and the Customs and police officials, both of the central authorities and of the communes, are entrusted with the duty of supervising the execution of all these regulations. The Customs officials note the passage of every consignment of narcotics which is exported, imported, or conveyed in transit and inform the public health inspectors accordingly.

As the law concerning opium, its derivatives and other similar products has only been in force a short time, it is not possible to judge of its efficacy. Certain

omissions have already been discovered and the question of amending the law is now being considered ; the proposed modifications aim mainly at the absolute prohibition of the traffic in prepared opium and the possibility of adopting regulations which will make the illegal possession of raw or prepared opium, morphine, cocaine and their respective salts a punishable act.

2. — *Convention between the Netherlands and Belgium regarding the Exercise of the Medical Profession in Communes on the Frontier.*

The Law of May 8th, 1869 (*Legal Gazette*, No. 80), ratifying various articles of the Convention concluded between the Netherlands and Belgium, according reciprocal authorisation to doctors established in the frontier communes of either of the two Kingdoms to exercise the medical profession or any of its branches in the frontier communes of the other.

The Legal Decree of June 18th, 1869 (*Legal Gazette*, No. 104), ordering the insertion in the *Legal Gazette* of the Convention concluded at Brussels on December 7th, 1868, between the Netherlands and Belgium, granting reciprocal authorisation to doctors in the frontier communes of either of the two Kingdoms to exercise the medical profession or any of its branches in the frontier communes of the other.

3. — *Convention between the Netherlands and Germany regarding the Exercise of the Medical Profession in Communes on the Frontier.*

The Law of April 16th, 1874 (*Legal Gazette*, No. 45), ratifying various articles of the Convention concluded between the Netherlands and the German Empire granting reciprocal authorisation to doctors established in the frontier communes of either of the two States to exercise the medical profession or any of its branches in the frontier communes of the other.

The Royal Decree of June 1st, 1876 (*Legal Gazette*, No. 71), ordering the insertion in the *Legal Gazette* of the Convention concluded on December 11th, 1873, at Berlin between the Netherlands and Germany, regarding the regulation of the exercise of the medical profession in frontier communes.

4. — *International Health Convention of Paris.*

The Law of February 21st, 1914 (*Legal Gazette*, No. 57), providing for adhesion to the Convention concluded at Paris on January 17th, 1912, between the Netherlands, Germany, the United States of America, the Argentine, Austria-Hungary, Belgium, Bolivia, Bulgaria, Chile, Colombia, Costa Rica, Cuba, Denmark, Ecuador, Spain, France, Great Britain and Ireland, Greece, Guatemala, Haiti, Honduras, Italy, Luxemburg, Mexico, Montenegro, Norway, Panama, Persia, Portugal, Rumania, Russia, Salvador, Serbia, Siam, Sweden, Switzerland, Turkey, Egypt and Uruguay.

The Royal Decree of February 5th, 1921 (*Legal Gazette*, No. 52), ordering the publication in the *Legal Gazette* of the International Health Convention concluded at Paris on January 17th, 1912.

ORGANISATION OF HEALTH INSPECTION.

The Law of November 27th, 1919, containing regulations with regard to health inspection (the Law on the Protection of Public Health, 1919 (*Legal Gazette*, No. 784).

Article 2 of this law provides that a Health Council shall be established to advise the Government in regard to any measures it may take to promote public health. If the Minister responsible for the execution of the law or the President of the Health Council consider it necessary, advice is given by the Health Council sitting in plenary session. In other cases, advice is given by commissions appointed by the President from among the members of the Council.

Article 3 entrusts with the duty of health inspection :

- (a) the principal public health inspectors ;
- (b) the public health inspectors and officials assisting them ;
- (c) the Health Commissions.

Article 7. — “1. The burgomasters and aldermen shall send to the Inspector-General, designated by a general administrative regulation, every month, or at the latter's request, when the number of deaths is abnormally high, every week, a return of the deaths which have occurred in their communes, using for this purpose a form prescribed by the Minister responsible for the execution of the present law.

“2. They shall inform as soon as possible, and at any rate within 14 days, the Inspector designated by a general administrative regulation of the setting up in practice, the departure, death, and, if they are aware of it, cessation of practice, of any doctor, dentist, chemist or midwife in their commune.”

In accordance with the provision of Article 8, Health Commissions shall be established for each commune which contains more than 18,000 inhabitants, or in the interests of which the Crown may consider such establishment desirable.

The establishment of a Health Commission may be ordered by the Crown in the case of several communes the joint population of which does not exceed 40,000 inhabitants.

Each Health Commission shall have the assistance of a secretary, and the latter shall receive a fixed salary, the amount of which is determined by the Permanent Commission of the Provincial States.

The expenses of the Health Commissions shall be borne by the commune or communes for whose benefit they are established. The cost of the salaries of the secretaries of the Health Commissions shall be borne by the State Treasury up to a maximum of 400 florins a year.

The decisions of the Communal Councils regarding matters of public health may only be promulgated, supplemented, modified or repealed if the Health Commission established by the commune has been consulted. The President, secretary and members of the Health Council, on the one hand, and the inspectors and officials, their assistants and the members and secretaries of the Health Commissions on the other, shall be entitled, the former throughout the Kingdom, and the latter within their respective districts, to enter all public buildings, schools and other premises employed for educational purposes, kindergärten, charitable institutions, orphanages, inns, lodging-houses, night-shelters, vehicles and vessels, factories, workshops, warehouses, shops, prisons, hospitals and bathing establishments, to the extent necessary for the application of the laws and decrees concerning public habitations, and to enter all places of residence in order to obtain the fullest possible information regarding the state and equipment of such buildings or places of residence.

LEGISLATION AGAINST INFECTIOUS DISEASES.

The Law of December 4th, 1872 (*Legal Gazette*, No. 134), laying down the measures to be taken for the prevention of infectious diseases, as subsequently amended.

The infectious diseases to which this law is applicable are : —

- (a) Asiatic cholera ;
- (b) Typhus and typhoid fever ;
- (c) Smallpox (variola and varioloids) ;
- (d) Scarlet fever ;
- (e) Diphtheria ;
- (f) Dysentery ;
- (g) Plague.

This law may, by an internal administrative regulation, be declared to apply also to other diseases for a fixed period in certain communes, in certain parts of the Kingdom, or throughout the Kingdom. The validity of such regulation shall expire one year after its promulgation, unless it has been confirmed during this period by law. For the time being the law in question is applicable, with the exception of Article 20, to epidemic cerebro-spinal meningitis, encephalitis lethargica and acute anterior poliomyelitis.¹

The burgomaster is authorised after consulting a doctor to cause persons suffering from an infectious disease and inhabiting a night-shelter, lodging-house, caravan or barge, to be removed to a public institution or to other lodgings for treatment if, in the opinion of the doctor, the patient can be safely transported.

¹ Article 20 requires that a notice bearing the words "Infectious Disease", together with the name of the disease, shall be posted up on the front of any house (or vessel) in which a person suffering from an infectious disease is being treated.

The burgomaster is authorised to prescribe, and if necessary to cause to be executed, the measures of disinfection mentioned in the preceding article in night-shelters, lodging-houses, caravans or barges ; he is also authorised, after consulting the inspector responsible under the public health law for supervising the application of legal stipulations concerning infectious diseases, to prescribe, and if necessary to cause to be executed, other measures designed to prevent the spread of disease. In the event of opposition to these measures, the night-shelter or lodging-house concerned may be declared closed by the burgomaster for a fixed period. The burgomaster is authorised, after consulting the inspector or a doctor practising in the commune, to cause to be cleaned and disinfected at the expense of the commune, in whole or in part, any houses, caravans, barracks or vessels which are, or which are likely to become, centres of infection.

The burgomaster is authorised to cause to be disinfected, at the expense of the commune, any infected objects or objects suspected of being infected, or, after first seizing them, upon a written declaration by a doctor that seizure is necessary, to cause them to be destroyed. The persons concerned may be required to bear a share of the expense entailed.

The State grants a subsidy of 50 per cent to the communes, in cases more specifically described, in respect of :

1. the cost of establishing or extending communal disinfection services;
2. the expenditure incurred each financial year in respect of cleaning and disinfection operations ordered by the burgomaster ;
3. the expenditure incurred each financial year in training as disinfectors persons designated for the purpose by the communal administration ;
4. the expenditure incurred each financial year in the rational (competent, specialised) administration of the disinfection service.

The subsidy of 50 per cent may also be granted to associations approved by the Minister as a contribution towards the cost of establishing and extending a disinfection service and towards the expenditure incurred each financial year in training as disinfectors persons designated for this purpose by the association concerned and in the rational administration of the disinfection service.

If infectious diseases break out or appear to be imminent, the burgomasters and aldermen may, at the expense of the commune, cause accumulations of rubbish to be removed, destroyed or disinfected and may take other measures in the interests of public hygiene.

In each commune in which the Permanent Commission of the Provincial States so decides, the communal administration is required to equip premises for the isolation and treatment of persons suffering from infectious diseases. The Permanent Commission also decides whether such installation is to be temporary or permanent.

Persons suffering from infectious diseases may not be transported or caused to be transported except in the cases provided for by law. Persons suffering from diseases of this kind are forbidden to travel. Objects which have been in contact with persons suffering from or who have died of an infectious disease or which were in the possession of such persons may not be transported, caused to be transported, given or lent, or accepted or caused to be accepted, unless they have been disinfected.

It is forbidden to create for others, by carelessness or negligence, an avoidable risk of contagion.

Regulations regarding School Attendance.

The inhabitants of houses, caravans or vessels in which an infectious disease has broken out may not attend school until eight days after a doctor has certified in writing that the disease has disappeared from the houses or vessels concerned. The prohibition is withdrawn as soon as disinfection has been carried out under the provisions of the law.

Any doctor who discovers a case of Asiatic cholera or plague must inform the burgomaster of the commune in which he has discovered the case within 24 hours. The burgomaster will forthwith forward a copy of this notification to the inspector.

Jenner Vaccination.

Teachers, both male and female, and pupils are only allowed to attend school if they produce a written statement by a doctor certifying that they have undergone Jenner vaccination successfully, or more than once, or that they have had infantile smallpox.

Nevertheless, teachers, both male and female, and pupils who produce a certificate signed and dated by a doctor showing that they have undergone Jenner vaccination once without results are allowed to attend school for a period of one year from the date of vaccination. These provisions apply both to kindergärten and to primary schools.

Notwithstanding these provisions, any teacher, whether male or female, or pupil will be allowed to attend school if they produce a certificate dated and signed by two doctors, showing, with reasons in support, that as a result of the Jenner vaccination no special danger is to be feared for the health of the person in whose favour the certificate has been issued.

Such a certificate remains valid for three years after the date of issue. None of the above persons, however, will be allowed to attend school if the burgomaster publicly notifies the fact that there is an epidemic of smallpox in the commune.

In each commune the communal administration takes steps to give the inhabitants the opportunity at least once every three months of being *vaccinated or re-vaccinated free of charge*. Such opportunity is given at least once a month if the Minister of Labour has publicly notified the fact that there is an epidemic of smallpox in any part of the Kingdom and at least once a week if smallpox has broken out within the commune concerned.

Notification.

All heads of households, lessees (male or female) of night-shelters or lodging-houses and masters of vessels calling at ports situated within any commune and the heads of such charitable institutions as are referred to in the law concerning public assistance, and of prisons, reformatories, public penitentiaries, workhouses and lunatic asylums, shall inform the burgomaster, within 24 hours after discovery, of any case of infectious disease which has occurred on the premises in question.

The same regulation shall apply to the commanding officers of army corps or of warships stationed in any port, in respect of all barracks, vessels or other premises placed under their control (Article 19).

Article 20. — “Any houses, caravans or vessels in which a case of an infectious disease occurs shall be furnished immediately, or at latest within 24 hours after notification, through the intermediary of the burgomaster and at the cost of the commune, with a distinctive sign (placard), clearly visible from outside (and if necessary with more than one such sign), bearing the inscription “infectious disease”, together with the name of the disease. The distinctive sign must remain there until it is certified by a doctor that the risk of contagion has disappeared.”

Article 27. — “On the appearance of any infectious disease, the President, secretary and members of the Health Council and the members of the Health Commissions shall be entitled, the former throughout the Kingdom and the latter within their respective districts, to enter all dwellings.”

Article 28. — “The burgomaster either alone or accompanied by persons whose assistance he may consider necessary and whom he has appointed for the purpose shall be entitled to enter the houses of the inhabitants, even against their will, between sunrise and sunset, in order to obtain the execution of the provisions of the present law or of the decrees issued in pursuance thereof.”

Article 29. — “The provincial and communal administrations shall continue to be responsible for issuing regulations or ordinances designed to prevent, check or combat infectious diseases, in so far as such regulations and ordinances are not contrary to the provisions of the present law.”

Vessels (Article 10).

Masters of vessels, which contain a person suffering from any of the diseases regarded as infectious under the terms of Article 1 of this law, or in which any person has suffered from or died as a result of any of these diseases during the last 14 days, are required before or at the moment of entering a commune in which they intend to stay or to moor their vessel to inform the burgomaster of the above facts. They must anchor in the area assigned to them by the burgomaster and remain there without entering into communication with the shore or with other vessels until disinfection has been carried out.

Smallpox.

Under the terms of Article 23 of the Decree of January 17th, 1923 (*Legal Gazette*, No. 18), laying down in detail the special measures to be taken to avert the risk of smallpox or to prevent the spread and consequences of this disease, the doctor who examines immigrants or other persons coming within the same category, at the frontier station or at the first Netherlands frontier-post, is required, on discovering the existence of an imminent danger to public health, immediately to inform the burgomaster and the health inspection official of the fact, without prejudice to the provisions of Article 16 of the Law of December 4th, 1872 (*Legal Gazette*, No. 134).

The Law of March 28th, 1877 (*Legal Gazette*, No. 35) (as amended on several occasions), for preventing the bringing of infection into the country by vessels arriving from the high seas.

Any vessel which arrives by sea in a port or harbour of the Netherlands, or which anchors there after having arrived by sea, is required, under certain conditions, to undergo health inspection. This inspection is carried out by the inspector responsible, under the Law for the Protection of Public Health, for supervising the application of the legal stipulations regarding infectious diseases, or by doctors under his control appointed for this purpose by the Crown.

The cost of health inspection and of the measures taken in consequence of such inspection are borne by the State.

The decree for the execution of this law was issued on January 3rd, 1923 (*Legal Gazette*, No. 34).

The Law of April 6th, 1884 (*Legal Gazette*, No. 80), laying down the special measures to be taken for the prevention of certain infectious diseases and for combating the spread and consequences thereof (as completed and amended on several occasions).

Under Article 1 of this law, the Crown is authorised, when Asiatic cholera, plague, yellow fever, smallpox or typhus break out within or outside the country, to prohibit by a general administrative decree, for a period not exceeding one year,

the importation, conveyance in transit or transport of rags, used garments, unwashed personal linen and bed-linen, raw wool, unworked bristle (horse-hair), skins, furs and other objects susceptible of carrying infection. Similarly, the State may take measures regarding the examination, isolation and disinfection of persons and goods, the transport of persons and goods and public and private means of transport, without prejudice to the provisions of the Law of December 4th, 1872 (*Legal Gazette*, Nos. 35 and 36).

The State may prohibit or restrict :

(a) the entry into the country of persons coming from countries or districts where one of the above diseases has broken out ;

(b) the transit through the country or the circulation within the country of persons coming from any country, district or locality, whether within or outside the Netherlands, in which one of the above-mentioned diseases has broken out.

LEGISLATION CONCERNING HYGIENE.

1. The Law of June 28th, 1881 (*Legal Gazette*, No. 97), containing legal stipulations for regulating the retail trade in strong drinks and for suppressing public drunkenness (the law on the liquor regime, as amended on several occasions).

By the Law of 1919 on the protection of public health, the “inspectors of alcoholic liquor” became “public health inspectors for the campaign against alcoholism” : Stress was thus laid on the social character of the work entrusted to these officials.

2. Legal stipulations concerning *canine rabies* : these stipulations, which were first imposed by the law on *canine rabies*, are now to be found in the law on cattle.

3. The law on foodstuffs : the Law of September 19th, 1919 (*Legal Gazette*, No. 581), regulating the inspection and designation of foodstuffs.

According to Article 1 of this law, the term “foodstuffs” applies to victuals (except meat and alimentary products manufactured from meat — sausages — in so far as the inspection of them does not require a knowledge of chemistry) and liquor, together with such articles of consumption as are employed in the preparation, manufacture, composition or preservation of victuals or liquor, and the articles specified in a general administrative regulation, in so far as all these objects are destined for trade or are put up for sale.

Article 2. — “1. For the purpose of foodstuff inspection the country is divided up into districts.

“2. Each district possesses an inspection service.

“3. The inspection services shall be established in the communes chosen by the State.”

Article 6. — “The Communal Council of each commune shall draw up one or more series of regulations regarding the inspection of goods.”

The Minister of Labour addressed a circular on May 7th, 1920, to the Permanent Commissions of the Provincial States in which he drew their attention to an Ordinance issued by his Department. The text of the latter reads :

“*Article 1.* — The term ‘foodstuffs’ is intended in the present Ordinance to mean the products defined in Article 1 of the Foodstuff Law. The following acts shall be assimilated to ‘sale’ :

- (a) Keeping a stock for the purpose of sale ;
- (b) Delivery ;
- (c) Exposure for sale ;
- (d) Transport ;
- (e) Offer for sale or exchange ;
- (f) Distribution ;
- (g) Keeping foodstuffs at a market ;
- (h) Keeping foodstuffs in a shop, place of residence, warehouse, factory, coach-house (stable, cattle-shed), vehicle or vessel, or on the premises of manufacturers, merchants, shopkeepers, dealers in, or hawkers of, articles of consumption..... except when such foodstuffs are intended for personal consumption.

“*Article 2.* — The sale of foodstuffs, the composition of which is faulty, or which are in an imperfect condition, is prohibited.

“*Article 3.* — The sale of foodstuffs, the consumption (use) of which is, or may be, harmful to life or health, is prohibited.

“People found guilty of infringing these regulations shall be liable to a term of imprisonment not exceeding six months or (and) to a fine not exceeding 2000 florins, and to the confiscation of the foodstuffs.

“According to the Royal Decree of March 26th, 1921, the term ‘foodstuffs’ is intended to mean :

“1. All raw materials (including colouring substances and substances perceptible to smell and taste), together with preservatives which are intended to be used, or are in fact used, in the preparation of alimentary substances or foodstuffs or of liquor ;

“2. All articles intended to be employed or in fact employed in packing foodstuffs or liquor ;

“3. Tapestry made of paper or of some other material and used to cover furniture or to make curtains ;

“4. Toys ;

“5. Rubber articles employed in feeding infants ;

“6. Toilet articles and cosmetics ;

- “7. Utensils used for the absorption of fluid or liquid food ;
- “8. Articles used in washing, cleaning and shoe polishing ;
- “9. Substances used for the destruction of insects (insecticides) or other vermin.”

Under Article 16, the Crown reserves the right :

“I. To issue as often as necessary, in the interests of public health, a general administrative regulation :

“(a) Designating the substances, objects or instruments the use of which is prohibited in the preparation, manufacture, or composition of foodstuffs specified in the regulation, or which may only be used subject to the rules laid down in the present regulation ;

“(b) Setting forth the requirements which must be complied with in the preparation, packing, preservation, handling or transport of the foodstuffs specified in the present regulation ;

“(c) Setting forth the requirements which the foodstuffs specified in the present regulation must fulfil.

“II. to declare the provisions of any general administrative regulation to be not applicable, on conditions to be laid down, to goods intended for export.

“III. At the same time We reserve to Ourselves the right to authorise the Communal Councils to issue instructions as to the requirements which a particular kind of foodstuff must satisfy.....”

The first paragraph of this Article makes the determination of the requirements which a foodstuff must satisfy a question of *general* interest. The *local* authority is not, however, completely eliminated : there are, indeed, certain articles which are susceptible of giving rise to local disputes. The third paragraph of the Article takes this point into consideration.

The Royal Decree of May 17th, 1921 (*Legal Gazette*, No. 673), provides that in communes in which a regulation has been issued setting forth the requirements which *milk* and *bread* must fulfil, these stipulations may be enforced until a general administrative regulation, issued by virtue of the first paragraph of Article 15 of the law, has specified the conditions which such foodstuffs must fulfil.

The Decree of 1922 regarding Bread : This Decree is based upon Articles 14 and 15 of the Foodstuff Law.

Article 14 provides :

“1. The State reserves the right to determine by a general administrative regulation the designations to be employed in trade for the foodstuffs and other articles which are destined for trade or which are put up for sale, viz. :

“(a) The designations which may applied, to the exclusion of all others, to foodstuffs or articles which are of the nature or composition specified in the general regulation, or the preparations of which has taken

place under the supervision established by a general administrative regulation ;

“(b) The designations which may not be applied to foodstuffs or articles which are of the nature or composition specified in the general regulation, or the preparation of which has *not* taken place under the supervision established by a general administrative regulation ;

“(c) The designations which must be applied to foodstuffs or articles which are of the nature or composition specified in the general regulation, or the preparation of which has *not* taken place under the supervision established by a general administrative regulation.

“2. Such general administrative regulation may lay down rules regarding the placing of these designations on the foodstuffs themselves, on the wrappings, or on the premises where the foodstuffs are exposed for sale.

“3. It may also be stipulated that foodstuffs and articles such as those referred to in the first paragraph may only be designated with the State's consent, and on conditions to be determined by the State, by a name which would not indicate, or which would indicate insufficiently, the nature and composition of the objects concerned.

“4. The designations relative to the nature or composition of foodstuffs or other articles can only be determined in the interests of commercial honesty ; the designations relative to supervision or preparation can be determined alike in the interests of public health and in the interests of commercial honesty.

“5. The State reserves the right to declare, on conditions to be specified, that the provisions of a general administrative regulation for determining designations are not applicable to goods intended for exportation.

“At the same time the State reserves the right to impose, in respect of infringements of such a general administrative regulation, in so far as it concerns other articles, a term of imprisonment not exceeding six months and a fine not exceeding 2,000 florins and, in addition, to order the confiscation of the articles which have formed the subject of the infringement. These articles may be seized, and in the event of condemnation, destroyed or rendered unsuitable for use by order of the judge, if the general interest so requires.”

The Decree of April 25th, 1922 (*Legal Gazette*, No. 221), in execution of Articles 14 and 15 of the Law of 1919 on Foodstuffs (*Legal Gazette*, No. 581).

Article 7 of this decree, relating to *bread*, reads as follows :

Article 7. “I. The preparation, packing, preservation, handling and transport of bread :

“(a) Must always be carried out in accordance with the rules of cleanliness ;

“(b) Cannot be carried out by persons suffering from purulent wounds or ulcers, or cutaneous (dermatosis) diseases of the head, hands or arms, if such persons come into contact with the dough or the bread ;

“(c) Cannot be carried out by persons who are carriers of typhus, paratyphus, dysentery or plague germs.

“II. The preparation of bread must be carried out exclusively by persons whose head, hands and arms are clean.

“III. During transport on the public highway the bread must be effectively protected against dust, dirt and insects.”

Article 8. — “The preparation, packing or handling of bread may only take place in premises which... etc., etc.”

The Law of July 25th, 1919 (*Legal Gazette*, No. 524), containing prohibitions with regard to meat and alimentary products manufactured with meat which might be harmful to public health (the Law of 1919 on the Inspection of Meat, No. 524).

The supervision designed to ensure the observation of this law is carried out by the public health inspectors.

The Law of September 19th, 1919 (*Legal Gazette*, No. 582), the object of which is to make the necessary funds available for establishing conduit-pipes for drinking-water.

Domestic Hygiene.

The Law of June 22nd, 1901, containing legal stipulations regarding domestic hygiene.

This law includes certain positive enactments, viz., stipulations guaranteeing the drawing up of suitable regulations regarding new buildings.

Article 1 reads as follows :

“1. The Communal Council shall issue regulations regarding the requirements which must be fulfilled :

“(a) in connection with the construction of houses ;

“(b) in connection with the total or partial renovation of houses ;

“(c) with regard to existing houses not included under (b).

“2. The Communal Council shall draw up regulations with regard to domestic hygiene.”

“*Article 9.* — In each commune one or more officials are entrusted with the supervision of the observance of the stipulations contained in Article 1, and all other legal stipulations regarding domestic hygiene. These officials may carry out their duties in one or in several communes.”

Article 11 regulates the granting of subsidies for the constructions of houses for the communes.

Article 12 contains rules regarding the obligation to take a census of houses.

Improvement of Housing and Over-Population.

“Article 14. — The Health Commission shall forward to the communal administration a statement with reasons in support indicating the houses :

“(a) which are uninhabitable in consequence of the non-observance of the stipulations contained in Article 1 or for any other reason. If the Commission is of opinion that the house can still be made habitable, it should append to its report a detailed description of the necessary improvements ;

“(b) which, although not uninhabitable, imperatively require certain duly specified improvements ;

“(c) which are occupied by a greater number of persons than is permissible under the local regulations.”

“Article 15. — 1. If not less than three adult inhabitants of a commune submit to the communal administration a reasoned complaint regarding one or more houses which, after personal examination, they consider to be uninhabitable, either in consequence of the non-observance of the stipulations contained in Article 1 or for any other reason, or which imperatively require certain duly specified improvements, or which are occupied by a greater number of persons than is permissible under the local regulations, the local administration shall immediately send such complaint to the Health Commission and shall obtain the opinion of the latter.

“2. The same rule applies if the head of a household or a person living alone submits a similar complaint with regard to the house occupied by the complainant.

“3. The facts set out in the complaint are communicated by the communal administration to the proprietor of the house or to the person who is competent to carry out the improvements demanded, and also to the occupant, viz., the head of the household, if the complaint relates to houses occupied by a greater number of persons than is permissible under the local regulations.

“4. The Health Commission shall within one month inform the communal administration by means of a reasoned opinion, and with due regard to the stipulation contained in the preceding article, whether it regards the complaint as justified, in whole or in part, or as unjustified.

“5. A copy of this opinion shall immediately be forwarded by the burgomaster and aldermen to the signatory of the complaint, or to the first signatory if there are more than one.”

Notification of the fact that houses are uninhabitable. The closing and pulling-down of such houses.

“Article 21. — 1. If a house is unfit for habitation, and if it cannot be rendered habitable by means of improvements, it shall be declared to be uninhabitable by a decision of the Communal Council, after consultation with the Health Commission.

“2. The decision whereby a house is declared uninhabitable shall also contain an order to evacuate it within a fixed period, running from the day on which the right to appeal against the decision expires, or from the day on which the decision is confirmed. In the interests of domestic hygiene, it may be necessary to evacuate whole quarters or to pull down one or more houses or groups of houses ; it may also be desirable to obtain possession of land, whether built over or not, which is subject to a covenant not to erect buildings, in order to execute an extension scheme or a building scheme. In such cases it may be necessary to *expropriate* the land.”

In order to prevent the construction of undesirable buildings, the Communal Council is authorised by Article 30 to prohibit the construction or reconstruction of buildings on land intended to be employed in the near future for the establishment of a street, canal or open space. As a preventive measure, the Council must, under Article 31, subject to a dispensation for a period not exceeding 10 years to be granted by the Permanent Commission of the Provincial States, draw up a plan for the extension of the commune in the case of all communes which contain more than ten thousand inhabitants or whose population has increased by more than one-fifth in the last five years.

The Permanent Commission of the Provincial States may require a commune, other than those mentioned in Article 31, to draw up a plan of extension.

It goes without saying that the measures set out above often cannot be executed without financial assistance (for example, when an order is given to carry out improvements). Under the terms of Article 33, advances, productive of interest, may be granted, by a decision of the Communal Council, to persons who have been ordered to carry out improvements. Such advances are only granted on the security of a mortgage placed on the buildings and estate in favour of which they are granted. They must be repaid within twenty years.

Associations whose work relates exclusively to domestic hygiene may obtain from the Communal Council advances, repayable in 75 years, either in regular instalments of equal amount or by means of annuities.

The commune may also grant to associations a right of ownership or a long lease in respect of communal lands or buildings (Article 35).

Under the terms of Article 36, funds may be made available by a decision of the Communal Council :

(a) for executing a plan of expropriation ;

(b) *for granting compensation in respect of the expenditure involved in the observation of the domestic hygiene regulations, including the cost of removal and of the transfer of the trade or industry exercised by the inhabitants of buildings which have been evacuated after being declared uninhabitable or of expropriated buildings.*

Advances may be granted to the communes by the State treasury. The payment of interest and amortisation must be effected by means of not more than 75 equal annuities. Grants may be made by the State treasury to associations, societies or

foundations, as compensation for the expenditure incurred by them in respect of domestic hygiene (Article 34).

Such associations, etc., must be engaged exclusively in the work of improving domestic hygiene and must be recognised as so engaged by the Crown.

LEGISLATION CONCERNING AGRICULTURAL WORKERS.

The Law of April 20th, 1918 (*Legal Gazette*, No. 259), designed to procure for agricultural workers the full ownership of a plot of land and a house or to provide them with a "free" plot of land on lease.

Article 1. — "In accordance with the provisions of the present law, any agricultural worker who fulfils the required conditions shall be entitled to obtain the full ownership of a plot of land and a house or to obtain a "free" plot of land on lease. (An agricultural worker within the meaning of the law is any person whose principal occupation is paid agricultural labour). If an agricultural worker desires to acquire a small estate he must be possessed of sufficient funds to pay at least one-tenth of the expenditure provided for in Article 4."

Article 4. — "The small estate¹ must be suitable for the purpose intended and must not cost more than 4,000 florins, including the preliminary improvements to be made in the existing buildings and in the land (in special cases the Crown may permit this maximum to be exceeded).

"The 'free' land must be situated in the proximity of the agricultural worker's house and must also be suitable for the purpose intended. The annual rent must not exceed 50 florins nor be much higher proportionally than that of a larger area of land of similar quality and condition. In special cases the Crown may allow this maximum to be exceeded.

"Advances productive of interest may be granted to the communes by the State Treasury.

"By a decision of the Communal Council, advances productive of interest may be granted to associations or foundations.

"The agricultural worker pays interest at a moderate rate. As a guarantee for the payment of his debt, he creates a first mortgage on his small estate.

"*Expropriation* may take place — without its being declared in advance by a law to be necessary in the public interest — in the interests of agricultural workers who desire to obtain the full ownership of a plot of land with a house or to obtain a plot of 'free' land on lease, except in the case of land or water belonging to a nursery garden, orchards or buildings, land or gardens attached to a nursery garden or orchard."

The Law of July 26th, 1918 (*Legal Gazette*, No. 492), containing regulations with regard to caravans and barges (the *Law on Caravans and Barges*).

¹ The term "small estate" is understood to mean a plot of land and an agricultural worker's house united so as to form a whole; "free land" is land which does not form a whole with an agricultural worker's house.

No caravan or barge may be inhabited unless a permit has been obtained from the Queen's Commissioner by one of the occupants. A permit is only granted if the caravan or barge is habitable and if the inhabitants possess sufficient means of subsistence. The names of the persons who may reside in the caravan or barge are mentioned in the permit. The burgomasters of the places of temporary residence are authorised to strike out the names of certain persons and to add others if the holder of the permit so requests. The permit also mentions the maximum authorised number of inhabitants. Each permit bears a number. In order to facilitate police enquiries, the number must be affixed to the caravan or barge in such a manner as to be clearly visible. Permits are granted for a period of three years, but they can in no case expire before February 1st, 1925. They may be withdrawn in the interval. The Communal Councils are authorised to designate *special* places in which caravans and barges must in certain cases remain. Caravans and barges *cannot be forbidden to stay in particular communes*. A temporary disposition allows inhabitants who have avowable and sufficient means of subsistence, but whose caravan or barge is unsatisfactorily equipped, to remain there during their lifetime. The system of elimination by extinction is thus employed.

The law was put into force on October 15th, 1919, with the exception of Article 31.

Article 31. — “All provincial and local regulations and the regulations of the polders administration shall be abrogated as from the date of the coming into force of the present law. The Communal Councils continue to be competent to issue decrees regarding the place which caravans and barges must occupy during their stay in each commune, and regarding the payment of a modest fee for remaining stationary on public land when the stay in any particular commune exceeds a certain period to be fixed by regulation. This period must not be less than 14 days, whether consecutive or not, in the same civil year.” The law was last amended by the Law of May 11th, 1923 (*Legal Gazette*, No. 198).

The Law of June 17th, 1918 (*Legal Gazette*, No. 379), designed to relieve the scarcity of houses.

As it was essential, by reason of the extraordinary circumstances obtaining, to take measures to relieve the scarcity of houses, the following decree was promulgated:

Article 1. — “We may declare that there is a scarcity of houses in any particular commune of so serious a character that it must immediately be relieved.”

Article 4. — “The Communal Council, together with the burgomasters and the aldermen, are required to give their assistance, with a view to the execution of Our Decree, either by carrying out on behalf of the commune the prescribed improvements or, with Our consent, by enabling associations, societies or foundations, recognised by Us as engaged exclusively in the work of improving domestic hygiene, to effect the necessary improvements.”

The Government therefore has power to compel indolent or recalcitrant persons to take steps to relieve the scarcity of houses. The Crown is now authorised to

designate the communes which must take measures to counteract the housing scarcity. The houses to be built will be of a *temporary* character. In view of the housing scarcity, the Crown may order, either in all communes or in certain specified communes, that "to prevent or to continue to prevent a house from being used for the purpose which it served on June 1st, 1920, without the consent of the burgomaster and aldermen, or to pull it down without such consent, is prohibited. The burgomaster and aldermen may make their consent dependent upon conditions calculated to relieve the housing scarcity" (Article 8). Unless prolonged, the housing right (or right to inhabit such houses) (*droit d'habitation*) expires at the end of five years (Article 2).

Decree of July 25th, 1928 (Legal Gazette, No. 485).

Under the terms of this Royal Decree, the use of the houses may only be granted to families with children. No other person may inhabit them unless they are members of the household of the principal occupier. No trade or calling may be carried on in them.

Care will be taken in letting the houses to see that persons of different sexes who have reached or passed the age of 12 years and who are not married to each other are not compelled to pass the night in the same room. One sleeping-place may not be arranged on top of another or on the floor.

Supervision. The commune or collective organisation which has constructed the houses is required to appoint a person to supervise the observance of the regulations regarding the letting, use and maintenance of the houses. No person may be entrusted with these duties in respect of more than 100 houses.

The following laws are still in force for the time being :

(a) The Law of March 26th, 1917 (*Legal Gazette*, No. 257), designed to prevent the unreasonable raising of house rents (*The Law on Rent Charges*).

(b) The Law of March 25th, 1918 (*Legal Gazette*, No. 182), designed to prevent the expulsion of tenants (*The Law on Notices to Quit*).

(c) The Law of February 19th, 1921 (*Legal Gazette*, No. 70), laying down measures to prevent houses being left unoccupied. (*The Law concerning the Obligation to let Empty Houses*).

DESCRIPTION OF CENTRAL AND LOCAL PUBLIC HEALTH ORGANISATIONS

The health service in the Netherlands is organised by localities (communes). Neighbouring communes appoint a special doctor for the schools or engage one of the doctors residing in the district to fulfil the duties of this office. Details concerning certain of these services will be found below. At Amsterdam there is a communal medical and sanitary service with a director and several senior officers. At The Hague there is a communal medical service and a school medical service, each

with its director. At Arnhem there is a school medical service, but no communal medical service. At Rotterdam and at Utrecht the two services are amalgamated. There are no provincial services. The Government intends to lay before the National Assembly a bill regarding the health services as soon as circumstances permit. It has been proposed to appoint school doctors in each district, but this proposal has not so far been carried into effect.

There are no provincial disinfection services in Holland such as exist in Belgium. Provincial services now exist in certain provinces (Gelderland, Friesland, Groningen, Northern Holland, Overijssel and Limburg), but they have been established by associations such as the "Green Cross" or the "White Cross"; there exist also certain communal disinfection services approved by ministerial decision. These associations maintain disinfection services approved by the Ministry and receive a fixed subsidy on this account in the same way as the communes.

Under Article 5*b* of the Law of December 4th, 1872 (*Legal Gazette*, No. 134), the State "grants to the communes, in cases and under conditions to be determined by a general administrative regulation, a subsidy of 50 per cent in respect of :

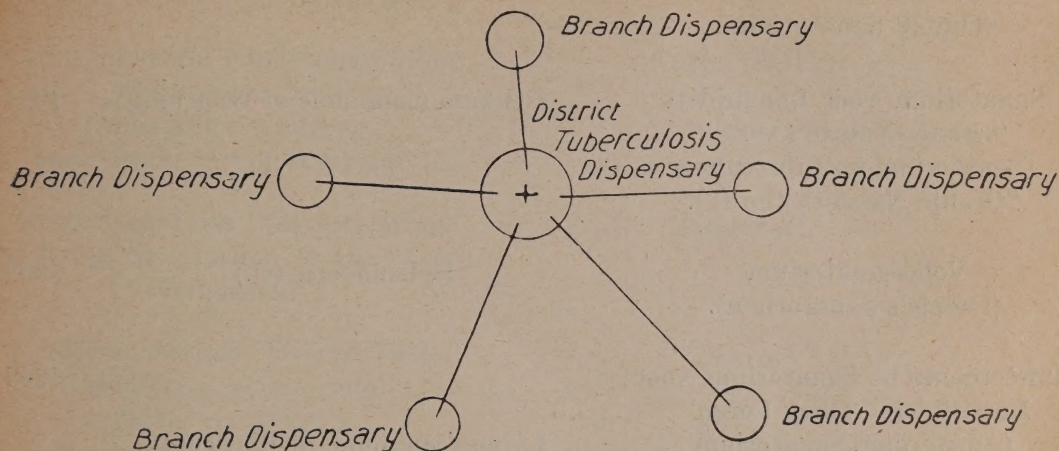
- "1. The cost of establishing or extending communal disinfection services ;
- "2. The expenditure incurred each financial year in respect of the cleaning and disinfecting operations provided for in Articles 4 and 5, in so far as such expenditure is not borne by the persons concerned under the terms of Article 5*a* ;
- "3. The expenditure incurred each financial year in training as disinfectors persons designated for the purpose by the communal administration ;
- "4. The expenditure incurred each financial year in ensuring the rational administration of the disinfection service."

Article 5. — "The State grants to associations who propose to effect the cleaning or disinfecting operations referred to in Articles 4 and 5, in cases and under conditions to be determined by a general administrative regulation, a subsidy of 50 per cent in respect of the cost of establishing or extending disinfecting services, and in respect of the expenditure incurred each financial year in training as disinfectors persons designated for the purpose by the association concerned, and in the rational administration of the disinfection service. The appointment of the persons attached to this service is effected as follows : possible candidates are invited by public advertisement to apply for the vacant post and a choice is made from among those who present themselves, or a further advertisement is published. The salaries are not everywhere the same ; certain communes pay higher salaries than others."

In certain provinces there exist *services for the campaign against tuberculosis*, organised by districts. At the centre of the organisation is a district consultation bureau (dispensary) with a tuberculosis specialist at the head of it. This doctor has his office in the district bureau and also visits the eccentric consultation bureaux,

i. e., the small bureaux situated on the periphery. Patients generally present themselves, therefore, at one of the eccentric bureaux on the advice of the doctor who ordinarily attends them. They only visit the central bureau of the district if the doctor considers it necessary. Patients are, if necessary, placed under observation in a nursing home attached to the service by contract.

Schema of a district (central) tuberculosis dispensary :



Travelling expenses may be repaid by the associations to poor patients out of the subsidies which the former receive from the State for the campaign against tuberculosis. The salary of a district doctor is, as a rule, about 7,000 florins. He acts only as a consulting physician.

The doctor in charge of the consultation bureau has under his orders one or more women district visitors, whose duty it is to supervise the association visitors who are engaged in the campaign against tuberculosis in the district concerned. The salary of these district visitors varies between 2,000 and 3,000 florins. The doctor and the district visitors are not State officials; they are employed by the *Provincial Association for the Campaign against Tuberculosis* — a private association to which the local associations are attached. A list of the popular sanatoria is given below.

NAME	PLACE	Year of Foundation
Sophiastichting (Foundation Sophia).	Scheveningen (commune of The Hague)	1880
Nederl. Sanatorium (Dutch Sanatorium).	Davos-Platz	1897
Sanatorium voor Longlijders "Oranje-Nassau's Oord". (Sanatorium for tuberculous "Oranje-Nassau's Oord").	Renkum (commune of Wageningen)	1901
Volkssanatorium (People's Sanatorium).	Hellendoorn (O.)	1902
Amsterdamsche Sanatorium voor Borstlijders "Hoog Laren" (Amsterdam Sanatorium for tuberculous patients "Hoog Laren").	Laren (commune of Blaricum).	1903
Sanatorium "Dennenhof"	Putten	1904
St. Bernardus Gesticht. (St. Bernard's Home).	Bredevoort near Aalten.	1904
St. Jacobus Gesticht. (St. Jacob's Home).	Eersel (N. Br.).	1905
Rusthuis "Moria". (Resting House "Moria").	Nunspeet.	1906
St. Oda Gesticht. (St. Oda's Home).	St. Oedenrode (N. Br.)	1908
Christelijk Sanatorium "Sonnevanc". (Christian Sanatorium "Sonnevanc").	Harderwijk.	1908

NAME	PLACE	Year of Foundation
Zeehospitium. (Seaside Sanatorium).	Hatwijk aan Zee.	1908
Zeehospitium "Zonneveld". (Seaside Sanatorium "Zonneveld").	Oostkapelle.	1909
Amsterdamsch Kindersanatorium "Hoog-Blaricum". (Amsterdam Children Sanatorium "Hoog-Blaricum").	Laren (N. H.)	1912
Kinderhospitium "Clarastichting" (Children Sanatorium of the "Clara Foundation").	Zandvoort.	1913
Kindersanatorium "Huis ter Drift". (Children Sanatorium "Huis ter Drift").	Doorn.	1913
Roomsch Katholic Sanatorium "Dekkerswald". (Roman Catholic Sanatorium "Dekkerswald").	Groesbeek.	1913
Sanatorium "Beekbergen"	Beekbergen.	1916
Lighallen "Mariaoord". (Open-air Pavilions "Mariaoord").	Gennep.	1918
Sanatorium "Hilversum".	Hilversum.	1920
Sanatorium "Berg en Bosch".	Apeldoorn.	1920
Sanatorium van het H. Hart van Jezus. (Sanatorium of the Sacré-Cœur).	Son (N. Br.)	1920
R. K. Limb. Groene Kruis Sanatorium (Rom. Cath. Sanatorium of the Green Cross of Limburg).	Horn (L.)	1921

NAME	PLACE	Year of Foundation
P. W. Janssen Ziekenhuis. (P. W. Janssen Hospital).	Almen (commune of Gorssel)	1921
Sanatorium St. Joān de Deo "Huize Kalorama".	Beek near Nijmegen	1921
Frisian People's Sanatorium	Appelscha.	1922
Sanatorium "Lighallen"	The Hague	1922
"Eerbeek" (voor typographen). ("Eerbeek" (for printers).	Beek.	1923
Maria Auxiliatrix.	Venlo.	1923

Wards for patients suffering from tuberculosis are attached to the hospitals of Bommel, Middelburg and Zevenaar.

The special ward for patients suffering from tuberculosis in the "Tesselschade" hospital at Amsterdam may be regarded as a "tuberculosis hospital".

The State grants subsidies to the sanatoria, calculated according to the number of days' treatment. (Approximately, 50 cents per day for treatment in the case of adults and 25 cents per day in the case of children's sanatoria.)

SANATORIA FOR PATIENTS OF A CERTAIN CATEGORY (*for collective nursing*)

NAME	PLACE	Year of Foundation
Sanatorium "Dennenhof".	Putten	1900
Sanatorium "Dennenoord".	Doorn.	1901
Sanatorium "Renkum".	Renkum.	1904
St. Bernardus Gesticht (St. Bernard's Home).	Bredevoort near Aalten.	1904
St. Jacobus Gesticht (St. Jacob's Home).	Eersel (N. Br.)	1905
Sanatorium "Boschrust".	Renkum.	1905
Sanatorium "Middenbosch".	Doorn.	1908
St. Oda Gesticht. (St. Oda's Home).	St. Oedenrode (N. Br.)	1908
R. K. Sanatorium "Dekkerswald". (Rom. Cath. Sanatorium "Dekkers- wald")	Groesbeek.	1913
Sanatorium van het H. Hart van Jezus. (Sanatorium of the Sacré Cœur).	Son (N. Br.)	1920
Sanatorium St. Joan de Deo "Huize Kalorama".	Beek near Nijmegen	1921

For details as to the treatment given to the patients, see the report of the "Netherlands Charitable Association for the Assistance of the Poor", established at Amsterdam, V, on page 727 of the report of the Inspector-in-Chief (*Reports and Communications*, No. 8, 1923).

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